



## State of Maryland

### Advisory Council on Mental Hygiene/Planning Council

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary, DHMH

#### MARYLAND ADVISORY COUNCIL ON MENTAL HYGIENE/ PL 102-321 PLANNING COUNCIL

##### Minutes

**June 18, 2013**

**Maryland Advisory Council Members:** Gerald Beemer, Sarah Burns, Chair;  
M. Sue Diehl, Vice Chair; Mike Finkle, Dennis McDowell, Joanne Meekins, Livia Pazourek,  
Charles Reifsnider, Anita Solomon, John Turner

**Maryland Advisory Council Members Absent:** Richard Blair, Jaimi L. Brown, Michele  
Forzley, Joshana Goga, Edwin C. Oliver, Robert M. Pender, John Scharf, Sherrie Wilcox

Individuals highlighted as such are resigned members who have not yet been replaced.

**PL 102-321 Council Members Present:** Carol Allenza, Coordinator; Robert Anderson,  
T.E. Arthur, Coordinator; Naomi Booker, Eugenia W. Conolly, Chicquita Crawford,  
Herb Cromwell, R. Terence Farrell, Nancy Feeley, Victor Henderson, Adrienne Hollimon,  
Julie Jerscheid, Cathy Marshall, Cynthia Petion, Jacqueline Powell, Sarah Rhine,  
Michelle Stewart, Kathleen Ward, Phoenix Woody

**PL 102-321 Council Members Absent:** Lynn Albizo, Tracee Bryant, Kate Farinholt,  
Vira Froehlinger, A. Scott Gibson, Gerri Gray, Michael Lang, Sharon Lipford, George Lipman,  
William Manahan, Dan Martin, Linda Raines, Sheryl Sparer, Jane Walker

**MHA Staff Present:** Brian Hepburn, Carrie Freshour, Tom Merrick, Robin Poponne,  
Iris Reeves, Greta Carter

**Guests and Others:** Darrell Nearon, Office of Forensic Services, DHMH;  
Gayle Jordan-Randolph, Maryland Department of Health and Mental Hygiene (DHMH);  
Zereana Jess-Huff, ValueOptions®Maryland; Karl Steinkraus, ValueOptions®Maryland;  
Tim Santoni, University of Maryland-Systems Evaluation Center;  
Deana Krizan, Consumer Quality Team of Maryland

---

c/o Mental Hygiene Administration

Spring Grove Hospital Center – 55 Wade Avenue – Dix Building – Catonsville MD 21228 – (410) 402-8473

TDD for Disabled – Maryland Relay Service (800) 735-2258

**Healthy People in Healthy Communities**

### **INTRODUCTIONS/ADOPTION OF MINUTES:**

The meeting was called to order by the Council Vice Chair, Sue Diehl. Attendees introduced themselves. The Joint Council's new State agency representatives are Nancy Feeley – Maryland State Department of Education (MSDE) and Cathy Marshall – Developmental Disabilities Administration (DDA). The draft minutes of the May 21, 2013 meeting were approved as written. The minutes are posted on the Mental Hygiene Administration's (MHA) Web site [www.dhmf.maryland.gov/mha](http://www.dhmf.maryland.gov/mha). The Maryland Advisory Council on Mental Hygiene's link is listed under "Resources".

### **ANNOUNCEMENTS:**

Carol Allenza, Joint Council member and Co-Coordinator of the P.L. Planning Council, representing the Maryland Coalition of Families for Children's Mental Health, is moving and will no longer be able to attend. Over the years, she has been a consistent voice in support of child and adolescent issues in all aspects of the system and has been diligent in participating on the Planning Committee. She has always kept the Council informed of special initiatives and events addressing the needs of children and adolescents. She will be missed and we wish her well in her new endeavors.

### **PRESENTATION –THE CONSUMER QUALITY TEAM OF MARYLAND (CQT) - Joanne Meekins, Director and Deana Krizan, Deputy Director**

The CQT is a consumer-run organization, staffed by consumers and family members. It is a part of the Mental Health Association of Maryland (MHAMMD) and supported by funding from MHA through the federal mental health block grant. CQT is authorized by MHA to conduct site visits, announced and unannounced, to programs in the Public Mental Health System, since 2007. In FY 2012, CQT made 170 site visits to 52 psychiatric rehabilitation programs and 130 visits to 33 units at four inpatient adult hospitals. During the site visits, consumers who volunteer are confidentially interviewed and share their concerns and satisfaction with the CQT. Issues of quality of services, quality of life, and satisfaction on individual, programmatic, and systemic levels are discussed. CQT concludes the visit with a verbal report of general comments to program or facility staff. CQT partners with the site staff to solve problems whenever possible. A written report, maintaining the confidentiality of consumers, is provided to the program director and the funding agency for the program. In most cases providers/staff make immediate changes based on the findings and consumers report improvements soon after the initial visit. Additionally, CQT holds regular Feedback Meetings with representatives from oversight agencies, MHA, and providers.

In January, MHA convened a group of advocates and providers to move some people from Spring Grove Hospital Center who were ready for discharge, but facing challenges finding placement in the community. CQT was asked to participate in this group and to interview these individuals about their desire to be discharged and their future aspirations in the community. The information gathered in these interviews was used by providers to help design special placements to help these individuals to be successful in the community. The interviews were added to the consumers' charts, so their individual concerns can be addressed when they are placed in a program. Forty-five people have been interviewed thus far and an additional twenty are on a list to be interviewed in the near future.

Recently, CQT received funding to expand its focus to include child and adolescent services beginning with site visits to eight private residential treatment centers (RTCs), as a part of the “RTC Retooling Project”. Future site visits will also include the MHA regional institutes for children and adolescents (RICA) facilities. Efforts are in the planning stages and will include young adults, who have received RTC or RICA services, as interviewers.

The CQT produces an annual report and you may visit their Web site at [www.cqtmtd.org](http://www.cqtmtd.org) .

#### **THE DIRECTOR’S REPORT:**

MHA’s Executive Director, Brian Hepburn, M.D., was on leave. In place of the Director’s Report, Deputy Secretary Gayle Jordan Randolph, M.D. and DHMH’s Director of the Office of Forensic Services, Darrell Nearon, Ph.D., J.D., updated the Joint Council on efforts implemented toward Behavioral Health Integration and future plans.

#### **Darrell Nearon, Ph.D., J.D., DHMH Office of Forensic Services**

Dr. Nearon is the newly appointed leadership of the DHMH Office of Forensic Services. Larry Fitch, Director of MHA’s Office of Forensic Services (OFS) and former co-Chair of the Interagency Forensic Services Committee, is retired as of June 30<sup>th</sup>. While the MHA OFS will continue to exist, some of the duties have been incorporated into the DHMH Office of Forensic Services.

Dr. Nearon has been director of the DHMH OFS for approximately eight months. His Office gives oversight to the Justice Services Division of ADAA and to the forensic offices of MHA and DDA. The OFS also oversees the Community Forensic Aftercare Program (CFAP), and Juvenile Pre-trial services. Dr. Nearon discussed some benefits of having multiple forensic programs under one office including the opportunity to pilot programs statewide and to eliminate “silos”. Some of the activities of the OFS include:

- Training of members of the judiciary, providers, mental health professionals, and others
- Collection of data by community evaluators on individuals, who may be Not Competent to Stand Trial (NCST) or Not Criminally Responsible (NCR), for future planning purposes
- Development of a training curriculum manual that includes new initiatives, best practices, and experience-based discussions from professionals previously trained to enhance skills in a behavioral health setting
- Community Forensic Aftercare Program - serves as liaison between individual, court/hospital system, and community to assist with monitoring of discharge, treatment compliance, and progress of individuals deemed NCR on conditional release or others with court supervision issues. Staff, in this program, begin working with individuals and the related systems by attending discharge planning meetings and offering advice and expertise in the early stages of the discharge process. Facilitating discharge and establishing strong linkages with providers, therapists, and other community re-entry resources show better outcomes and decreased readmissions to the state facilities, i.e. jails, hospitals, and detention centers.

Additionally, the OFS encourages diversion and advises the CSAs who have mental health courts in their jurisdiction. Dr. Nearon also co-chairs the Interagency Forensic Services Committee, a sub-committee of the Joint Council, with Judge Lipman.

**Gayle Jordan-Randolph, M.D., DHMH Deputy Secretary of Behavioral Health and Disabilities - Behavioral Health Integration (BHI)**

Dr. Jordan-Randolph provided an update on the DHMH Behavioral Health Integration progress. The “next steps/phase 3” of the BHI process is overseen by Dr. Jordan-Randolph and Chuck Milligan, DHMH Deputy Secretary of Health Care Financing. Dr. Jordan-Randolph discussed aspects of Phase 3 of the BHI including the development of the Request for Proposals (RFP) to select an Administrative Services Organization (ASO) to administer the new MA financing model, as well as stakeholders’ meetings that will focus on various elements of the RFP.

The behavioral health administration organizational process is well underway with the recent appointment of Lisa Hadley, M.D., J.D. as Clinical Director for MHA/ADAA and the merger of the forensic services of the three administrations (MHA, ADAA, and DDA) overseen by Dr. Nearon. Next steps will include combining the MHA and ADAA finance and procurement processes. However, the staff of these offices will not yet be physically moved. Elements of the organizational chart, in its draft form, are being explored at this time. In this process of blending administrations, Dr. Jordan-Randolph expressed the importance of maintaining the strengths and characteristics of each administration that are unique and serve to expedite and support many current special projects and initiatives.

Dr. Jordan-Randolph encouraged Joint Council members to stay involved, participate in stakeholder meetings, and ask questions on critical issues. The Web site address is: <http://dhmh.maryland.gov/bhd/SitePages/integrationefforts.aspx> .

**COUNCIL BUSINESS:**

**Review of the FY 2014 MHA State Mental Health Plan** - Cynthia Petion announced the Planning Committee will meet in the Mitchell Building to review the FY 2014 State Plan Draft and elements of the Mental Health Block Grant application.

The meeting was adjourned.

The Executive Committee did not meet in deference to the State Plan Review Meeting.

**Please note, the Agenda for the July 16<sup>th</sup> Council meeting will be posted on the Advisory’s Council’s web page, under the resources section, on MHA’s Web site**  
[www.dhmh.maryland.gov/mha](http://www.dhmh.maryland.gov/mha).